



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270542

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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Containers

TYPE

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos

k. Quantity Units No. TYPE

0	0	0	3	0	4	0	1	T
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GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS

P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

05/29/88
Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.

b. Address: 60 Commerce Drive

Buffalo, NY 14218

c. Driver Name/Title: James Jordan

PRINT/TYPE

d. Phone No.: 716-827-7200

e. Truck No.: 145

f. Vehicle License No./State: 13035P NY

Acknowledgement of Receipt of Materials.

g. James Jordan 04/13/98
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____

i. Address: _____

j. Driver Name/Title: _____

PRINT/TYPE

k. Phone No.: _____ l. Truck No.: _____

m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc.

c. Phone No.: 716-285-3344

b. Physical Address: 5600 Niagara Falls Blvd.

d. Mailing Address Same

Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech

b. Operator's* Phone No.: 804-354-6437

c. Operator's* Address: 2229 Tenlynn St., Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Robert Conner Robert Conner 04/29/88
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

440585



* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270542

Section I

GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

 TYPE:

DM	-	METAL DRUM
DP	-	PLASTIC DRUM
B	-	BAG
BA	-	6 MIL. PLASTIC BAG or WRAP
T	-	TRUCK
O	-	OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

05/29/88
Shipment Date

Section II

TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: James Jordan
d. Phone No.: 716-827-7200 e. Truck No.: 145
f. Vehicle License No./State: 13035P NY
Acknowledgement of Receipt of Materials.

g. James Jordan 04/13/98
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III

DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Kathy Penkhus Kathy Penkhus 04/13/98
Name of Authorized Agent Signature Receipt Date

Section IV

ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. *Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassady Leroy Cassady 05/29/88
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

NON-HAZARDOUS SPECIAL

If waste is NOT asbestos waste; complete only Sections I, II, III.

Section I **GENERATOR** (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufact.

c. Address 2890 Woodbridge d. Address: 1002 Oswego Street

Edison, New Jersey 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

[illegible]

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

UNITS

P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Jack D. Harmon
Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.

b. Address: 60 Commerce Drive
Buffalo, NY 14218

c. Driver Name/Title: Robert Harvey PRINT/TYPE

d. Phone No.: 716-827-7200 e. Truck No.: 84

f. Vehicle License No./State: NY 13034P

Acknowledgement of Receipt of Materials.

g. Driver Signature 05/09/88
Shipment Date

TRANSPORTER II

h. Name: _____

i. Address: _____

j. Driver Name/Title: _____

k. Phone No.: _____

l. Truck No.: _____

m. Vehicle License No./State: _____

PRINT/TYPE

Acknowledgement of Receipt of Materials

n. _____
Driver Signature

Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

Name of Authorized Agent Signature

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 Receipt Date

Section IV **ASBESTOS** (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information:

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LOBOY, CASSIDY, RM 206 05/12/88
Print/Type Operator's Signature Date

f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

REORDER ONLY THROUGH BFI / UARCO CONTRACT

GENERATOR RETAIN



260-720B 5/93



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 270541

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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 Containers

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j. Description of Waste: Non-Friable Asbestos k. Quantity: 00030 Units: Y No. 01 TYPE: T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Jack D. Harmon

Signature

051398

Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Robert Harvey
d. Phone No.: 716-827-7200 e. Truck No.: 84
f. Vehicle License No./State: NY B034P
Acknowledgement of Receipt of Materials.

g. Ant J 051398
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Al Smith Al Smith 051398
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d; f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassiday, RM Leroy Cassiday 051398
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270543

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK O HARRISON
Generator Authorized Agent Name

[Signature]
Signature

051498
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Naxxat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
g. Acknowledgement of Receipt of Materials.
[Signature] 051498
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM [Signature] 051498
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270543

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0	9
---	---	---	---	---	---

 Units

0	1
---	---

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON

JACK D. HARMON

05/14/98

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
g. Acknowledgement of Receipt of Materials: _____

g. Driver Signature [Signature] Shipment Date 05/14/98

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials: _____

n. Driver Signature _____ Shipment Date

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Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent Pam Scott Signature Pam Scott Receipt Date 05/14/98 san6D

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Loroy Cassidy, RM Operators Signature [Signature] Date 05/14/98
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270544

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Jack D. Harmon

Signature

051498

Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-i)

TRANSPORTER I

a. Name: Harmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL G. MYERS
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 11729P (N.Y.)

Acknowledgement of Receipt of Materials.

g. Michael G. Myers 051498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature 051498
Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Robert C. Cuddy, RM 051498
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270544

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

051498
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL G. MYERS
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 11729P (N.Y.)

Acknowledgement of Receipt of Materials.

g. Michael G. Myers 051498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 051498 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: L. Roy Cassiday, RM L. Roy Cassiday 051498
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both, _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270545

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

R

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Jack D. Harmon
Signature

051598

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL G. MYERS / DRIVER
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 1SS50 P (N.Y.)

Acknowledgement of Receipt of Materials.

g. Michael G. Myers 051598
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-754-6437
c. Operator's* Address: 2229 Tomlynna St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Cassidy LeRoy Cassidy 051598
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270545

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

2

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

051598
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL G. MYERS / DRIVER
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 1SS50 P (N.Y.)

Acknowledgement of Receipt of Materials.

g. Michael G. Myers 051598
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

051598
Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 051598 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LoRoy Cassidy LoRoy Cassidy 051598
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Print/Type Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270546

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

1

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

Jack D. Harmon

051598

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: GARY L. PHATT
d. Phone No.: 716-827-7200 e. Truck No.: 120
f. Vehicle License No./State: 13033P NY
Acknowledgement of Receipt of Materials.

g. Gary L. Phatt 051598
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 874-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Casiday 051598
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270546

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

1

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harman
Generator Authorized Agent Name

Jack D. Harman
Signature

051598
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: GARY L. PLATT
d. Phone No.: 716-827-7200 e. Truck No.: 120
f. Vehicle License No./State: 13033P NY
Acknowledgement of Receipt of Materials.

g. Gary Platt 051598
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 051598 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy Leroy Cassidy 051598
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Print/Type Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.270547

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D HARMON
Generator Authorized Agent Name

[Signature]
Signature

051898
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. [Signature] 051898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Cassidy [Signature] 051898
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 270547

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Jack D. Harmon
Generator Authorized Agent Name

Jack D. Harmon
Signature

051898
Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (Driver)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 051898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 051298 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator completes e)

a. Operator's Name: EarthTech b. Operator's Phone No.: 804-354-6437
c. Operator's Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: Leroy Cassidy [Signature] 051898
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270548

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMAN
Generator Authorized Agent Name

[Signature]
Signature

051898
Shipment Date

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL C. RIVERS
d. Phone No.: 716-827-7200 e. Truck No.: _____
f. Vehicle License No./State: 155000 N.Y.
Acknowledgement of Receipt of Materials.

g. [Signature] 051898
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____ 051898
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ 051898
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: [Signature] 051898
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270548

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

051898
Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL G. MYERS
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 1555OP NY
Acknowledgement of Receipt of Materials.

g. Michael G. Myers 051898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

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Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 051898 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. *Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lois Cassidy Lois Cassidy 051898
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.270549

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bessert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

9

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

051998
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Timothy J. O'Hara (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTZ-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 051998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lesley Casiday DBURKE
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.270549

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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Containers

TYPE

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos

k. Quantity

Units

No.

TYPE

00030

Y

0

I

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Signature

051998

Shipment Date

UNITS

P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Timothy J. O'Hara (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTZ-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Driver Signature

051998

Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent

Signature

Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy [Signature] 051998
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270550

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossett Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0	0
---	---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

051998
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL MYERS PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 15550P N.Y.

Acknowledgement of Receipt of Materials.

g. Michael Myers 051998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Larry C. Cusack 051998
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270550

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

051998
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL MYERS
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 15550P N.Y.

Acknowledgement of Receipt of Materials.

g. Michael Myers 051998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 051998 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Roy Cassidy Roy Cassidy 051998
Print/Type Operator's Signature Date
f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270552

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

052090
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL MYERS
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 15550 P (N.Y.)

Acknowledgement of Receipt of Materials.

g. Michael Myers 052090
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Conner, RM 052090
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270552

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

052098
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-i)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL MYERS
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 15550 P (N.Y.)
g. Acknowledgement of Receipt of Materials.
Michael Myers 052098
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 052098 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM [Signature] 052098
Print/Type Operator's Signature Date
f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.270551

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACIE D. HARMON
Generator Authorized Agent Name

Jac D. Har
Signature

052098
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TITLE
d. Phone No.: 716-827-7200 e. Truck No. RT2-4
f. Vehicle License No./State: PX-496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 052098
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TITLE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy RM 052098
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270551

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

052098
Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (Driver)
d. Phone No.: 716-827-7200 e. Truck No.: RT2-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 052098
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott
Name of Authorized Agent

Pam Scott
Signature

052098
Receipt Date

san6D

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassady RN Leroy Cassady 052098
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.270553

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON

Generator Authorized Agent Name

Signature

052198

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 052198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: EarthTech Asst. Mgr. RM 052198
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270553

Section I

GENERATOR (Generator completes all of Section I)

a. Generator Name: <u>USEPA Region II</u>	b. Generating Location: <u>Bossert Manufacturing Site</u>
c. Address: <u>2890 Woodbridge</u> <u>Edison, New Jersey 08817</u>	d. Address: <u>1002 Oswego Street</u> <u>Utica, NY 13502</u>
e. Phone No.: <u>732-591-2278</u>	f. Phone No.: <u>315-734-1394</u>

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____	h. Owner's Phone No.: _____
------------------------	-----------------------------

i. BFI WASTE CODE	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>											Containers	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																																									
j. Description of Waste: <u>Non-Friable Asbestos</u>	k. Quantity	Units	No.	TYPE	TYPE																																																	
	<table border="1"><tr><td>0</td><td>0</td><td>0</td><td>3</td><td>0</td></tr></table>	0	0	0	3	0	<table border="1"><tr><td>2</td></tr></table>	2	<table border="1"><tr><td>0</td></tr></table>	0	<table border="1"><tr><td>1</td></tr></table>	1	<table border="1"><tr><td>T</td></tr></table>	T	<table border="1"><tr><td colspan="5">DM - METAL DRUM</td></tr><tr><td colspan="5">DP - PLASTIC DRUM</td></tr><tr><td colspan="5">B - BAG</td></tr><tr><td colspan="5">BA - 6 MIL. PLASTIC BAG</td></tr><tr><td colspan="5">or WRAP</td></tr><tr><td colspan="5">T - TRUCK</td></tr><tr><td colspan="5">O - OTHER</td></tr></table>					DM - METAL DRUM					DP - PLASTIC DRUM					B - BAG					BA - 6 MIL. PLASTIC BAG					or WRAP					T - TRUCK					O - OTHER				
0	0	0	3	0																																																		
2																																																						
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DM - METAL DRUM																																																						
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T - TRUCK																																																						
O - OTHER																																																						

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

<u>JACK D. HARMON</u> Generator Authorized Agent Name	<u>JACK D. HARMON</u> Signature	<table border="1"><tr><td>0</td><td>5</td><td>2</td><td>1</td><td>9</td><td>8</td></tr></table> Shipment Date	0	5	2	1	9	8
0	5	2	1	9	8			

UNITS		
P	-	POUNDS
Y	-	YARDS
M ³	-	CUBIC METERS
Y ³	-	CUBIC YARDS
O	-	OTHER

Section II

TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

TRANSPORTER II

a. Name: <u>Hazmat Environmental Group, Inc.</u>	h. Name: _____
b. Address: <u>60 Commerce Drive</u> <u>Buffalo, NY 14218</u>	i. Address: _____
c. Driver Name/Title: <u>TIMOTHY J. O'HARA (DRIVER)</u>	j. Driver Name/Title: _____
d. Phone No.: <u>716-827-7200</u>	k. Phone No.: _____
e. Truck No.: <u>RTL-4</u>	l. Truck No.: _____
f. Vehicle License No./State: <u>PX5496 (NY)</u>	m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

g. <u>Timothy J. O'Hara</u> Driver Signature	<table border="1"><tr><td>0</td><td>5</td><td>2</td><td>1</td><td>9</td><td>8</td></tr></table> Shipment Date	0	5	2	1	9	8
0	5	2	1	9	8		

n. _____ Driver Signature	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date						

Section III

DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: <u>Niagara Recycling, Inc.</u>	c. Phone No.: <u>716-285-3344</u>
b. Physical Address: <u>5600 Niagara Falls Blvd.</u> <u>Niagara Falls, NY 14304</u>	d. Mailing Address: <u>Same</u>
e. Discrepancy Indication Space: _____	

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. <u>Pam Scott</u> Name of Authorized Agent	<u>Pam Scott</u> Signature	<table border="1"><tr><td>0</td><td>5</td><td>2</td><td>1</td><td>9</td><td>8</td></tr></table> Receipt Date	0	5	2	1	9	8	<u>san6D</u>
0	5	2	1	9	8				

Section IV

ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: <u>EarthTech</u>	b. Operator's* Phone No.: <u>804-354-6437</u>
c. Operator's* Address: <u>2229 Tomlynn St., Richmond, Virginia 23230</u>	
d. Special Handling Instructions and additional information: _____	

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: <u>EarthTech</u> Print/Type	<u>EarthTech</u> Operator's Signature	<table border="1"><tr><td>0</td><td>5</td><td>2</td><td>1</td><td>9</td><td>8</td></tr></table> Date	0	5	2	1	9	8
0	5	2	1	9	8			
f. Name and Address of Responsible Agency: <u>USEPA Region II, Edison, New Jersey 08817</u>								
g. <input type="checkbox"/> Friable; <input checked="" type="checkbox"/> Non-friable; <input type="checkbox"/> Both _____ % friable <u>100</u> % nonfriable								

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270554

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossett Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

052198

Shipment Date

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL G. MYERS
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 1SS5OP (N.Y.)

Acknowledgement of Receipt of Materials.

g. Michael G. Myers 052198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. _____
Acknowledgement of Receipt of Materials.

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Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy C. Cusack, CM 052198
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270554

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

Shipment Date

052198

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL G MYERS
d. Phone No.: 716-827-7200 e. Truck No.: 135
f. Vehicle License No./State: 1SS50P (N.Y.)

Acknowledgement of Receipt of Materials.

g. Michael G. Myers 052198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. _____
Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 052198 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Cassiday, RM [Signature] 052198
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Print/Type Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270555

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

R

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

052798

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: RTL-4
f. Vehicle License No./State: B5496(NY)
Acknowledgement of Receipt of Materials.

g. [Signature] 052798
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

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Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: [Signature] RM [Signature] 082717
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270555

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity 00030 Units 2 No. 1 TYPE T
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

052798
Shipment Date

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TITLE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496(NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 052798
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TITLE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____ 052798
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d. destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 052798 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Ray Casady, RM Ray Casady 052798
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270557

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

K

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

082898
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: 56
f. Vehicle License No./State: PL9875 NY / 11AUS² M
Acknowledgement of Receipt of Materials.
g. Daniel Brown 052898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d; f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Loisoy Condon, RM Loisoy Condon 082898
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

tor refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270557

Section I

GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name:

Jack D. Harmon
Signature

052898
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II

TRANSPORTER (Generator completes a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 e. Truck No.: 56
f. Vehicle License No./State: PL9875 NY / 11205PM
Acknowledgement of Receipt of Materials.
g. Daniel Brown 052898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III

DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 052898 san 60
Name of Authorized Agent Signature Receipt Date

Section IV

ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM Leroy Cassidy 052898
Print/Type Operator's Signature Date
f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270556

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

1

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D HARMON Jack D Harmon
Generator Authorized Agent Name Signature

052898
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: RTZ-4
f. Vehicle License No./State: DX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. Ohara 052898
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lesley G. Gentry, CM Lesley G. Gentry 052898
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 270556

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity: 00030 Units: 1 No.: 01 TYPE: T

GENERATOR'S CERTIFICATION: I hereby certify that the above-named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON Jack D. Harmon
Generator Authorized Agent Name Signature

052898
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTZ-4
f. Vehicle License No./State: PX5496 (NY)
g. Acknowledgement of Receipt of Materials.

Timothy J. O'Hara 052898
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 052898 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled; and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Loray Cassidy, RM Loray Cassidy 052898
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270558

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossart Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

R

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261

JACK D. HARMON

Generator Authorized Agent Name

Signature

052998

Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218

c. Driver Name/Title: _____

d. Phone No.: 716-827-7200 e. Truck No.: 123

f. Vehicle License No./State: QD 1946 NY
Acknowledgement of Receipt of Materials.

g. Pete Romeo 052898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____

i. Address: _____

j. Driver Name/Title: _____

k. Phone No.: _____ l. Truck No.: _____

m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437

c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEBY CANNON, CM LEBY CANNON 052998
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270558

Section I

GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

Containers

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos

k. Quantity

Units

No.

TYPE

0	0	0	3	0
---	---	---	---	---

2

0

1

T

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

Jack D. Harmon

052998

Shipment Date

Section II

TRANSPORTER I

(Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER II

a. Name: Hazmat Environmental Group, Inc.

b. Address: 60 Commerce Drive

Buffalo, NY 14218

c. Driver Name/Title: Pete Roncone

PRINT/TYPE

d. Phone No.: 716-827-7200

e. Truck No.: 123

f. Vehicle License No./State: 1A2870 P NY

Acknowledgement of Receipt of Materials.

g. Pete Roncone

052998

Driver Signature

Shipment Date

h. Name: _____

i. Address: _____

j. Driver Name/Title: _____

PRINT/TYPE

k. Phone No.: _____

l. Truck No.: _____

m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--	--

Driver Signature

Shipment Date

Section III

DESTINATION

(Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc.

c. Phone No.: 716-285-3344

b. Physical Address: 5600 Niagara Falls Blvd.

d. Mailing Address Same

Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Kathy Roncone

Signature

Kathy Roncone

052998

Receipt Date

Section IV

ASBESTOS

(Generator complete a-d, f, g, Operator completes e)

a. Operator's Name: EarthTech

b. Operator's Phone No.: 804-354-6437

c. Operator's Address: 2229 Tomlynn St., Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: Larry Cassidy, RM

Print/Type

Operator's Signature

052998

Date

f. Name and Address

of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.





NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270559

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

052998
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Harmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: 56
f. Vehicle License No./State: PC 9875 NY
Acknowledgement of Receipt of Materials.

g. Daniel Brown 052998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Ray Cassidy, RM 052998
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270559

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Jack D. Harmon
Generator Authorized Agent Name

Jack D. Harmon
Signature

052998
Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 e. Truck No.: 56
f. Vehicle License No./State: PC 9875 NY
Acknowledgement of Receipt of Materials.
g. Daniel Brown 052998
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 052998 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator completes e.)

a. Operator's Name: EarthTech b. Operator's Phone No.: 804-354-6437
c. Operator's Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: Larry Cassidy, RM Larry Cassidy 052998
Print/Type Operator's Signature Date
f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation.

UNABCO CONTRACT

RETURN TO GENERATOR



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 270560

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, New Hersey 08817 **Utica, NY 13502**
e. Phone No.: **732-591-2278** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: **Non-Habitable Asbestos** k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

060198

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: **Hazmat Environmental Group, Inc.**
b. Address: **60 Commerce Drive**
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: **716-827-7200** PRINT/TYPE e. Truck No.: _____
f. Vehicle License No./State: **FW9037**
Acknowledgement of Receipt of Materials.

g. **Jack B. Gougeon** **060198**
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **5600 Niagara Falls Blvd.** d. Mailing Address **Same**
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6437**
c. Operator's* Address: **2229 Tomlynn St., Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **Lesly Cassady, RM** **060198**
f. Name and Address of Responsible Agency: **USEPA Region II/Edison, New Jersey 08817**
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270560

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Hersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Hazable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HANMAN
Generator Authorized Agent Name

JACK D. HANMAN
Signature

060198
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: FRANK G. SAWYER I
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 164
f. Vehicle License No./State: FW9037
Acknowledgement of Receipt of Materials.

g. Frank G. Sawyer 060198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060198 son60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-364-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM Leroy Cassidy 060198
Print/Type Operator's Signature Date
f. Name and Address
of Responsible Agency: USEPA Region II/Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340501

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

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 Containers:

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity: 00030 Units: Y No.: 01 TYPE: T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON Jack D. Harmon 060198
Generator Authorized Agent Name Signature Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 e. Truck No.: 84
f. Vehicle License No./State: NY 11387P
Acknowledgement of Receipt of Materials.

g. Aut 1 060198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 304-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Larry Conway, RM Larry Conway 060198
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340501

GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

 TYPE:
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Signature

For Emergency Response

Shipment Date

060198

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II: TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: FRANK SAWICK
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 84 164
f. Vehicle License No./State: NY 11287P 11205P
Acknowledgement of Receipt of Materials.

g. [Signature] 060198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III: DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060298 san60
Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Generator complete a-d, f, g, Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEROY CASSIDY, RM [Signature] 060198
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340502

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, NJ 08817 **Utica, NY 13502**
e. Phone No.: **732-591-2278** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: **Non-Friable Asbestos** k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

060298
Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: **Hazmat Environmental Group, Inc.**
b. Address: **60 Commerce Drive**
Buffalo, NY 14218
c. Driver Name/Title: **Alvin Cox Hran**
d. Phone No.: **716-827-7200** PRINT/TYPE e. Truck No.: **110/P**
f. Vehicle License No./State: **13036 P NY**
Acknowledgement of Receipt of Materials.
g. **CEL 2 GL** **060298**
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **56th St. & Niagara Falls Blvd.** d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

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Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6437**
c. Operator's* Address: **2229 Tomlynn Street, Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **LeRoy Cassidy, RM** **060298**
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: **USEPA Region II, Edison, New Jersey 08817**

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340502

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Haermen
Generator Authorized Agent Name

Jack D. Haermen
Signature

060298
Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Alvin Cochran
d. Phone No.: 716-827-7200 e. Truck No.: 110/P
f. Vehicle License No./State: 13036 P NY
Acknowledgement of Receipt of Materials.

g. Alvin Cochran 060298
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 060298 can6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassibey, RM Self 060298
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340503

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON Jack D. Harmon 060298
Generator Authorized Agent Name Signature Shipment Date

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA DRIVER j. Driver Name/Title: _____
PRINT/TYPE PRINT/TYPE
d. Phone No.: 716-327-7200 e. Truck No.: RTL-4 k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: PX5496 (NY) m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 060298 n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEON CASSIDY, RM LEON CASSIDY 060298
Print/Type Operator's Signature Date
f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340503

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON [Signature] 060298
Generator Authorized Agent Name Signature Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA DRIVER j. Driver Name/Title: _____
d. Phone No.: 716-827-7200 e. Truck No.: R72-4 k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: PX5496 WV m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 060298 n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060298 san6p
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM [Signature] 060298
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Print/Type Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340504

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon Jack D. Harmon 060398
Generator Authorized Agent Name Signature Shipment Date

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER) j. Driver Name/Title: _____
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4 k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: PX5496 (NY) m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.
g. Timothy J. Ohara 060398 n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lesly C. Coady, RM 060398
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340504

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON JACK D. HARMON 060398
Generator Authorized Agent Name Signature Shipment Date

For Emergency Response:

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n)

TRANSPORTER I TRANSPORTER II

a. Name: Hazmat Environmental Group, Inc. h. Name: _____

b. Address: 60 Commerce Drive i. Address: _____

Buffalo, NY 14218

c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER) j. Driver Name/Title: _____

d. Phone No.: 716-827-7200 e. Truck No.: RTL-4 k. Phone No.: _____ l. Truck No.: _____

f. Vehicle License No./State: PX5496 (NY) m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.

g. Timothy J. Ohara 060398 n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d. destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344

b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____

Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 060398 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d. f. g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437

c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: ROY CASSEY, RM ROY CASSEY 060398
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340505

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2090 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

Containers

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos

k. Quantity

Units

No.

TYPE

0	0	0	3	0
---	---	---	---	---

4

0

1

T

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

For Emergency Response:

Shipment Date

0	6	0	3	9	8
---	---	---	---	---	---

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-i.)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.

b. Address: 60 Commerce Drive

Buffalo, NY 14218

c. Driver Name/Title: Alvin Cochran (Driver)

PRINT/TYPE

d. Phone No.: 716-827-7200 e. Truck No.: 110

f. Vehicle License No./State: 13036 NY

Acknowledgement of Receipt of Materials.

g. [Signature]

0	6	0	3	9	8
---	---	---	---	---	---

Driver Signature

Shipment Date

TRANSPORTER II

h. Name: _____

i. Address: _____

j. Driver Name/Title: _____

PRINT/TYPE

k. Phone No.: _____ l. Truck No.: _____

m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--	--

Driver Signature

Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc.

c. Phone No.: 716-285-3344

b. Physical Address: 56th St. & Niagara Falls Blvd.

d. Mailing Address: _____

Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

Name of Authorized Agent

Signature

Receipt Date

--	--	--	--	--	--

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437

c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: [Signature]

Print/Type

Operator's Signature

Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340505

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

060398
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Alvin Cochran (Driver)
PRINT/TITLE
d. Phone No.: 716-827-7200 e. Truck No.: 110
f. Vehicle License No./State: 13036 NY
Acknowledgement of Receipt of Materials.

g. Alvin Cochran 060398
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TITLE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060398 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassady, RM Leroy Cassady 060398
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340506

Section I

GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

 TYPE:

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

For Emergency Response:

060498
Shipment Date

Section II

TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14213
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 e. Truck No.: 56
f. Vehicle License No./State: PC 9875 NY
Acknowledgement of Receipt of Materials.

Daniel Brown
Driver Signature

060498
Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

Driver Signature

Shipment Date

Section III

DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent

Signature

Receipt Date

Section IV

ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Kathy Casaday, PM

Operator's Signature

Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.





NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340506

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. Harmon
Generator Authorized Agent Name

Jack D. Harmon
Signature

060498
Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Daniel Brown Driver
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 56
f. Vehicle License No./State: PC 9875 NY
Acknowledgement of Receipt of Materials.

g. Daniel Brown 060498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060498 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM Leroy Cassidy 060498
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340507

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394
If owner of the generating facility differs from the generator, provide:
g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

4

 No.:

0	1
---	---

 TYPE:

T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON Jack D. Harmon 060498
Generator Authorized Agent Name Signature Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 060498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Towlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEROY CANNON, RM 060498
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340507

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste, subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

060498
Shipment Date

For Emergency Response:

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER) j. Driver Name/Title: _____
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4 k. Phone No.: _____
f. Vehicle License No./State: PX5496 (NY) l. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 060498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____
l. Vehicle License No./State: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060498 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM [Signature] 060498
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

or refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340508

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bessert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Jack D. Harmon

Signature

060598

Shipment Date

For Emergency Response:

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (OWNER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: DX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 060598
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: EarthTech 1/23/98
Print/Type Operator's Signature

--	--	--	--	--	--

 Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340508

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Jack D. Harmon

Signature

060598

Shipment Date

For Emergency Response:

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 060598
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 060598 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e, h)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: EarthTech LeRoy Cassidey 1388 Powder 060598
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340509

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, NJ 08317 **Utica, NY 13502**
e. Phone No.: **732-591-2276** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: **Non-Friable Asbestos** k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

060598
Shipment Date

For Emergency Response:

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: **Hazmet Environmental Group, Inc.**
b. Address: **60 Commerce Drive**
Buffalo, NY 14218
c. Driver Name/Title: **Daniel Brown** **Driver**
d. Phone No.: **716-827-7200** e. Truck No.: **56**
f. Vehicle License No./State: **PL 9875 NY**

Acknowledgement of Receipt of Materials.

g. **Daniel Brown** **060598**
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. _____
Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **56th St. & Niagara Falls Blvd.** d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature _____ Receipt Date

--	--	--	--	--	--

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6637**
c. Operator's* Address: **2229 Tomlynn Street, Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **Robert C. ...** **...**
Print/Type Operator's Signature

--	--	--	--	--	--

 Date

f. Name and Address of Responsible Agency: **USEPA Region II, Edison, New Jersey 08817**

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340509

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON [Signature]

0	6	0	5	9	8
---	---	---	---	---	---

Generator Authorized Agent Name Signature Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Daniel Brown Driver
d. Phone No.: 716-827-7200 e. Truck No.: 56
f. Vehicle License No./State: PC 9875 NY
Acknowledgement of Receipt of Materials.

g. [Signature]

0	6	0	5	9	8
---	---	---	---	---	---

Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n.

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott [Signature]

0	6	0	5	9	8
---	---	---	---	---	---

06/05/98
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e, h)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: [Signature] RM

0	6	0	5	9	8
---	---	---	---	---	---

Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340510

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2390 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON [Signature] 060898
Generator Authorized Agent Name Signature Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. [Signature] 060898
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: [Signature] 060898
PRINT/TYPE Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340510

Section I **GENERATOR** (Generator completes all of Section I)

a. Generator Name: <u>USEPA Region II</u>	b. Generating Location: <u>Bossert Manufacturing Site</u>
c. Address <u>2890 Woodbridge</u> <u>Edison, NJ 08817</u>	d. Address: <u>1002 Oswego Street</u> <u>Utica, NY 13502</u>
e. Phone No.: <u>732-591-2278</u>	f. Phone No.: <u>315-734-1394</u>

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

BFI WASTE CODE

Containers

TYPE

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

i. Description of Waste: **Non-Friable Asbestos**

k. Quantity	Units	No.	TYPE
-------------	-------	-----	------

0	0	0	3	0	4	0	1			T
---	---	---	---	---	---	---	---	--	--	---

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS

P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON *Jack D. Harmon* 060898
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.

b. Address: 60 Commerce Drive
Buffalo, NY 14218

c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE

d. Phone No.: 716-827-7200 e. Truck No.: RTZ-4

f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. Offara

0	6	0	8	9	8
---	---	---	---	---	---

Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____

i. Address: _____

j. Driver Name/Title: _____

k. Phone No.: _____

m. Vehicle License No./State: _____

PRINT/TYPE

l. Truck No.: _____

Acknowledgement of Receipt of Materials.

n. _____ Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott

0	6	0	8	9	8
---	---	---	---	---	---

san60
Name of Authorized Agent Signature Receipt Date

Section IV **ASBESTOS** (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437

c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230

d. Special Handling Instructions and additional information:

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Larry Cassady, PM [Signature] 060898
Print/Type Operator's Signature Date

f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

ORDER ONLY THROUGH BFI / UARCO CONTRACT

RETURN TO GENERATOR



260-720B 5/93



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340511

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0	4
---	---	---	---	---	---

 Units

0	1
---	---

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON Signature 060898 Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Daniel Brown Driver
d. Phone No.: 716-827-7200 e. Truck No.: 56
f. Vehicle License No./State: PL 9875 NY
Acknowledgement of Receipt of Materials.
g. Daniel Brown 060898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tonlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: John C. Caskey, Jr. Owner

--	--	--	--	--	--

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817 Operator's Signature _____ Date _____

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340511

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

K

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

For Emergency Response:

Shipment Date

060898

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Daniel Brown Driver
d. Phone No.: 716-827-7200 e. Truck No.: SL
f. Vehicle License No./State: PC 9875 NY
Acknowledgement of Receipt of Materials:

g. Daniel Brown 060898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials:

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Henry Oliver Jr. Henry Oliver Jr. 060898
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassiday, PM Leroy Cassiday 060898
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340512

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, NJ 08817 **Utica, NY 13502**
e. Phone No.: **732-591-2278** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

 TYPE:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: **Non-Friable Asbestos** k. Quantity: **00030** Units: **Y** No.: **01** TYPE: **T**

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

060998
Shipment Date

For Emergency Response:

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: **Hazmat Environmental Group, Inc.**
b. Address: **60 Commerce Drive**
Buffalo, NY 14218
c. Driver Name/Title: **Daniel Brown** **Driver**
d. Phone No.: **716-827-7200** e. Truck No.: **56**
f. Vehicle License No./State: **PL 9K75 NJ**
Acknowledgement of Receipt of Materials.
g. **Daniel Brown** **060998**
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **56th St. & Niagara Falls Blvd.** d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6437**
c. Operator's* Address: **2229 Tomlynn Street, Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **Loisoy Camacho, RM** **060998**
f. Name and Address of Responsible Agency: **USEPA Region II, Edison, New Jersey 08817**
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340512

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

--	--	--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON Jack D. Harmon 060998
Generator Authorized Agent Name Signature Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Daniel Brown Driver
d. Phone No.: 716-827-7200 e. Truck No.: 56
f. Vehicle License No./State: PC 9875 NJ
Acknowledgement of Receipt of Materials.

g. Daniel Brown 060998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060998 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LORAY CASSIDY, RM Loray Cassidy 060998
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Print/Type Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340513

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394
If owner of the generating facility differs from the generator, provide:
g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

060998
Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTZ-4
f. Vehicle License No./State: PX5496 NY
Acknowledgement of Receipt of Materials.
g. Timothy J. Ohara 060998
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above-named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LARRY CASSIDY, EIA 060998
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340513

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.**

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

060998
Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 NY

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 060998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 060998 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator completes e)

a. Operator's Name: EarthTech b. Operator's Phone No.: 804-354-6437
c. Operator's Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: LARRY CASSIDY, RM LARRY CASSIDY 060998
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both % friable: 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340514

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0	4
---	---	---	---	---	---

 Units

0	1
---	---

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon
Generator Authorized Agent Name

Jack D. Harmon
Signature

061098
Shipment Date

For Emergency Response:

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 061098
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Larry Cusack, ILM 061098
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340514

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0	4
---	---	---	---	---	---

 Units:

0	1
---	---

 No.

--	--	--	--	--	--

 TYPE

--	--	--	--	--	--

 T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon Signature 061098 Shipment Date
Generator Authorized Agent Name

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara Signature 061098 Shipment Date
Driver Signature

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____ Signature _____ Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Signature 061098 san60
Name of Authorized Agent Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Larry Cassidy, RM Signature 061098
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340515

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08917 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394
If owner of the generating facility differs from the generator, provide:
g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

JACK D. HARMON
Signature

061198
Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J OHARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. Ohara 061198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tonlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEROY CUSICK, JR. GM 061198
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340515

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

061198
Shipment Date

For Emergency Response:

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 061198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 061198 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Casiday, RM LeRoy Casiday 061198
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340516

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon
Generator Authorized Agent Name

Signature

For Emergency Response: Shipment Date

061298

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: 112-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 061298
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator completes e)

a. Operator's Name: EarthTech b. Operator's Phone No.: 804-354-6437
c. Operator's Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: LOREY CUSIDY, RA 061298
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340516

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity: 00030 Units: 2 No.: 01 TYPE: T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon
Generator Authorized Agent Name

Jack D. Harmon
Signature

For Emergency Response: Shipment Date

061298

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: ATL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 061298
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 061298 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: L. Roy Cassidy, RM L. Roy Cassidy 061298
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 340517

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. Haerman
Generator Authorized Agent Name

Signature

For Emergency Response:

Shipment Date

06/16/98

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (driver)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5996 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 06/16/98
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-l)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Custody, PM RR Foudry 06/17/98
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340517

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON JACK D. HARMON 061698
Generator Authorized Agent Name Signature Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-i)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER) j. Driver Name/Title: _____
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTZ-4 k. Phone No.: _____
PRINT/TYPE
f. Vehicle License No./State: PX5496 (NY) m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials:
g. Timothy J. O'Hara 061698 n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Dam Scott Dam Scott 061698 san 6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: -2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lorey Cassidy, PM Lorey Cassidy 061698
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340519

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

2

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Signature

For Emergency Response:

Shipment Date

06-14-98

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14213
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 NY
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 061898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above-named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Wesley Cannon, ENR 061898
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340519

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harman Jack D. Harman 061898
Generator Authorized Agent Name Signature Shipment Date

For Emergency Response:

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

Timothy J. O'Hara 061898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 061898 son6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LoRoy Cassidy, PM LoRoy Cassidy 061898
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367533

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, New Jersey 08817 **Utica, NY 13502**

e. Phone No.: **732-591-2278** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: **Non-Friable Asbestos** k. Quantity

00	030
----	-----

 Units

Q

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON **JACK D. HARMON** **062298**
Generator Authorized Agent Name Signature Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: **Hazmat Environmental Group, Inc.**
b. Address: **60 Commerce Drive**
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: **716-827-7200** PRINT/TYPE **164**
e. Truck No.: **164**
f. Vehicle License No./State: **PW9037**
Acknowledgement of Receipt of Materials.
g. **Frank H. George** **062298**
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE _____
l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **5600 Niagara Falls Blvd.** d. Mailing Address **Same**
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6437**
c. Operator's* Address: **2229 Tomiynn St., Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **Raymond J. Smith** **Raymond J. Smith**

--	--	--	--	--	--

f. Name and Address of Responsible Agency: **USEPA Region II, Edison, New Jersey 08817**
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367533

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Q

 No.

0	1
---	---

 TYPE

T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

062298

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: 164
f. Vehicle License No./State: PW9037
Acknowledgement of Receipt of Materials.

g. Frank S. Szwed 062298
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Kathy Penkiewicz Kathy Penkiewicz 062298
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassady, RM Leroy Cassady 062298
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 340518

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	2	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon
Generator Authorized Agent Name

Signature

For Emergency Response:

Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA
PRINT/TITLE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PK5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. Ohara 062298
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TITLE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address _____
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Robert C. Conley, PM

--	--	--	--	--	--

Print/Type Operator's Signature Date

f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367508

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

062498

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: _____ j. Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: _____ PRINT/TYPE
f. Vehicle License No./State: 1W7037 k. Phone No.: _____ l. Truck No.: _____
Acknowledgement of Receipt of Materials. m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
g. T. M. C. Group

0	6	2	4	9	8
---	---	---	---	---	---

 n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leslie C. Connerly, RM

0	6	2	4	9	8
---	---	---	---	---	---

 Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367508

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

062498

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Hazmat Environmental Group, Inc.</u>		h. Name: _____	
b. Address: <u>60 Commerce Drive</u> <u>Buffalo, NY 14218</u>		i. Address: _____	
c. Driver Name/Title: <u>Frank</u>		j. Driver Name/Title: _____	
d. Phone No.: <u>716-827-7200</u>	e. Truck No.: <u>164</u>	k. Phone No.: _____	l. Truck No.: _____
f. Vehicle License No./State: <u>PW9037</u>		m. Vehicle License No./State: _____	
Acknowledgement of Receipt of Materials: _____		Acknowledgement of Receipt of Materials: _____	
g. <u>Frank G. Sawyer</u>	<u>062498</u>	n. _____	_____
Driver Signature	Shipment Date	Driver Signature	Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 062498 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Loray Cassidy, RM Loray Cassidy 062498
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367509

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Rossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	0	0	0
---	---	---	---	---	---

 Units

--

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D HARMON

Generator Authorized Agent Name

Signature

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Eazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Anthony J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE RTL-4
e. Truck No.: PX5476 (NY)
f. Vehicle License No./State: Acknowledgement of Receipt of Materials.
Anthony J. O'Hara

0	6	2	4	7	8
---	---	---	---	---	---

g. Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: USEPA Region II, Edison, New Jersey 08817

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f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817 Operator's Signature _____ Date _____
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367509

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

--

 No.

0	1
---	---

 TYPE

	T
--	---

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

062498
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Timothy J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 062498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Dan Scott Dan Scott 062498 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lobby Cassady, RM Lobby Cassady 062498
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367562

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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 Containers

--	--	--	--	--	--	--	--	--	--

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	2	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HAZMAN

JACK D. HAZMAN

002517

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: 164
f. Vehicle License No./State: PW 9037
Acknowledgement of Receipt of Materials.

g. [Signature]

0	6	7	5	9	8
---	---	---	---	---	---

Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n.

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f.

--	--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEON C. [Signature]

0	0	5	1	7
---	---	---	---	---

Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367532

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law; has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HAEMEN

Generator Authorized Agent Name

Signature

062598

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: 164
f. Vehicle License No./State: PW 9037
Acknowledgement of Receipt of Materials.
g. Frank G. Downer 062598
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 062598 son6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LARRY CASSIDY, REM Larry Cassidy 062598
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367511

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

 TYPE:

DM	-	METAL DRUM
DP	-	PLASTIC DRUM
B	-	BAG
BA	-	6 MIL. PLASTIC BAG or WRAP
T	-	TRUCK
O	-	OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity:

2	0	0	0	0	4
---	---	---	---	---	---

 Units:

0	1
---	---

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

062578

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE: RT-4
e. Truck No.: PX5496(NY)
f. Vehicle License No./State: Acknowledgement of Receipt of Materials.
g. Driver Signature: [Signature] Shipment Date: 062578
TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials. _____

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date:

--	--	--	--	--	--

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: [Signature] Print/Type: _____ Operator's Signature: _____ Date:

0	6	2	5	7	8
---	---	---	---	---	---

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367511

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

 TYPE:

DM	-	METAL	DRUM
DP	-	PLASTIC	DRUM
B	-	BAG	
BA	-	6 MIL. PLASTIC BAG	or WRAP
T	-	TRUCK	
O	-	OTHER	

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0	4
---	---	---	---	---	---

 Units:

0	1
---	---

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Jack D. Harmon

Signature

062598

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TITLE: RTL-4
e. Truck No.: PX5496 (NY)
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 062598
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TITLE: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 062598 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lorey Cassidy, RM Lorey Cassidy 062598
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367512

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0	9
---	---	---	---	---	---

 Units

0	1
---	---

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Haeman

Generator Authorized Agent Name

Signature

062698

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TITLE RTL-4
e. Truck No.: PX5496 (NY)
f. Vehicle License No./State: PX5496 (NY)
g. Acknowledgement of Receipt of Materials. Timothy J. Ohara 062698
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TITLE _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--	--

 Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Timothy J. Ohara 062698
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367512

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

 TYPE:

DM	-	METAL DRUM
DP	-	PLASTIC DRUM
B	-	BAG
BA	-	6 MIL. PLASTIC BAG or WRAP
T	-	TRUCK
O	-	OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0	0
---	---	---	---	---	---

 Units:

0	1
---	---

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harman
Generator Authorized Agent Name

Jack D. Harman
Signature

062698
Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE: RTL-4
e. Truck No.: PX5496 (NY)
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 062698
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE: _____
l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature: _____ Shipment Date: _____

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 062698 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Logan Cassidy Logan Cassidy 062698
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367513

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	7	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Jack D. Ha

0	7	0	8	9	8
---	---	---	---	---	---

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TITLE
e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. Ohara

0	7	0	8	9	8
---	---	---	---	---	---

Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TITLE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____

--	--	--	--	--	--

Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367513

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

070898

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
PRINT/TYPE
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 070898
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Kathy Penkiewicz Kathy Penkiewicz 070898
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM Leroy Cassidy 070898
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367514

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

 Units

4	0	1	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

 No.

0	7	0	9	9	8	0	0	0	0
---	---	---	---	---	---	---	---	---	---

 TYPE

T									
---	--	--	--	--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Jack D. Harmon

Generator Authorized Agent Name

Signature

070998

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE RT-4
e. Truck No.: PX5476 (NY)
f. Vehicle License No./State: Acknowledgement of Receipt of Materials.

Acknowledgement of Receipt of Materials.

g. Timothy J. Ohara 070998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f.
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title:
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367514

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

070998

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: RT2-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. Ohara 070998
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

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Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Kathy Penkiewicz Kathy Penkiewicz 070998
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: A. LeRoy Cassady, RM [Signature] 070998
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367515

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

--	--	--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

071078

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TITLE PT
e. Truck No.: PX 2496 (NY)
f. Vehicle License No./State: 071098
g. Driver Signature Timothy J. Ohara Shipment Date 071098

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TITLE _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent _____ Signature _____ Receipt Date

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Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type _____ Operator's Signature _____ Date

--	--	--	--	--	--	--	--	--	--

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367515

Section I

GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Containers

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos

k. Quantity Units No. TYPE
00030 Y 0 1 T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON

Signature

071098

Shipment Date

Section II

TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX 5496 (NY)

Acknowledgement of Receipt of Materials:

g. Timothy J. O'Hara 071098
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials:

o. _____
Driver Signature Shipment Date

Section III

DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. KATHY Penkover 071098
Name of Authorized Agent Signature Receipt Date

Section IV

ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Conkey 071098
Print/Type Operator's Signature Date

f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367516

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

071398

Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA DRIVER
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: PTL 4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 071398
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature _____ Date _____
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished, or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367516

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40-CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

Shipment Date

071398

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n.)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 071398
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 071398 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Bob Cassidy, RM Bob Cassidy 071398
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367517

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

--	--	--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

07/14/98

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
g. Acknowledgement of Receipt of Materials.

Timothy J. O'Hara 07/14/98
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Larry C. ...

--	--	--	--	--	--	--	--	--	--

Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367517

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Q

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

071498

Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 071498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 071498 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEROY CURSODY, RM LeRoy Cursody 071498
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367518

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

 Units

4									
---	--	--	--	--	--	--	--	--	--

 No.

0	1								
---	---	--	--	--	--	--	--	--	--

 TYPE

T									
---	--	--	--	--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Jack D. Harmon

071518

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hezmac Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14216
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE
e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 071598
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type _____ Operator's Signature _____ Date

--	--	--	--	--	--	--	--	--	--

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367519

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
j. Description of Waste: Non-Friable Asbestos k. Quantity

--	--	--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

TYPE									
DM	-	METAL	DRUM						
DP	-	PLASTIC	DRUM						
B	-	BAG							
BA	-	6 MIL. PLASTIC BAG							
			or WRAP						
T	-	TRUCK							
O	-	OTHER							

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D HARMON

Signature

071613

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n.)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA DRIVER
d. Phone No.: 716-827-7200 PRINT/TITLE RTI-4
e. Truck No.: PX5476 (WV)
f. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

g. Timothy J. Ohara 071698
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TITLE _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. _____
Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Seme
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LEWIS C. BOWEN, III

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Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367519

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0	0
---	---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

071698

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: RT2-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 071698
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 071698 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Cassady, RM LeRoy Cassady 071698
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable * 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270566

Section I GENERATOR (Generator completes all of Section I.)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

1

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

Shipment Date

07/2/1988

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (Driver)
d. Phone No.: (716) 827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 07/2/1988
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
Print/Type Operator's Signature Date

f. Name and Address
of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270567

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harman
Generator Authorized Agent Name

Jack D Har
Signature

072298
Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. OHARA (DRIVER)
d. Phone No.: (716) 827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
g. Timothy J. O'Hara 072298
Driver Signature Shipment Date
TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 283-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
f. Name and Address of Responsible Agency: _____
g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270568

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

072398
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: (716) 827-7200 PRINT/TYPE e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 072398
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d. destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g. Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type _____ Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270570

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2690 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

072498
Shipment Date

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: (716) 827-7200 e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 072498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
f. Name and Address of Responsible Agency: _____
g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.270561

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Friable Asbestos k. Quantity 00030 Units Y No. 01 TYPE T
BQ Asbestos, 9 NA 2212 III

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D Harmon Jack D Harmon 072098
Generator Authorized Agent Name Signature For Emergency Response: Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Hazmat Environmental Group, Inc.</u>		h. Name: _____	
b. Address: <u>60 Commerce Drive</u>		i. Address: _____	
<u>Buffalo, NY 14218</u>			
c. Driver Name/Title: <u>TIMOTHY J. O'HARA (DRIVER)</u>		j. Driver Name/Title: _____	
d. Phone No.: <u>716-827-7260</u> PRINT/TYPE <u>RTL-4</u>		k. Phone No.: _____ PRINT/TYPE _____	
e. Truck No.: <u>PX5496 (NY)</u>		l. Truck No.: _____	
f. Vehicle License No./State: <u>PX5496 (NY)</u>		m. Vehicle License No./State: _____	
Acknowledgement of Receipt of Materials.		Acknowledgement of Receipt of Materials.	
g. <u>Timothy J. O'Hara</u> <u>072798</u>		n. _____ <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>	
Driver Signature	Shipment Date	Driver Signature	Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Joseph Cassidy, RM
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☒ Friable; ☐ Non-friable; ☐ Both 100 % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.270571

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y	0	1
---	---	---

 No.

--	--	--	--	--	--

 TYPE

--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon
Generator Authorized Agent Name

Jack D. Harmon
Signature

072878
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (Driver)
d. Phone No.: (716) 827-7200 PRINT/TYPE e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 072878
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature

--	--	--	--	--	--

 Date

f. Name and Address of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270562

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, NJ 08817 **Utica, NY 13502**
e. Phone No.: **732-591-2278** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

j. Description of Waste: **Friable Asbestos** k. Quantity

0	0	0	2	0	4
---	---	---	---	---	---

 Units

0	1
---	---

 No.

0	1
---	---

 TYPE

T

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON **JACK D. HARMON** **072998**
Generator Authorized Agent Name Signature For Emergency Response: Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: **Hazmat Environmental Group, Inc.** h. Name: _____
b. Address: **60 Commerce Drive** i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: **TIMOTHY J. O'HARA (DRIVER)** j. Driver Name/Title: _____
d. Phone No.: **716-827-7200** e. Truck No.: **RTL-4** k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: **PX 5476 (NY)** m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.
g. **Timothy J. O'Hara** **072998** n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **56th St. & Niagara Falls Blvd.** d. Mailing Address: **Same**
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6437**
c. Operator's* Address: **2229 Tomlynn Street, Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **LEOY C. CROOK, JR., RM** **072998**
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: **USEPA Region II, Edison, New Jersey 08817**

g. ☒ Friable; ☐ Non-friable; ☐ Both **100** % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovati



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270562

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: Friable Asbestos k. Quantity: 00030 Units: Q No.: 01 TYPE: T
RQ Asbestos, 9 NA 2212 III

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon Jack D. Harmon 072998
Generator Authorized Agent Name Signature For Emergency Response: Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218

c. Driver Name/Title: TIMOTHY J. O'HARA (Driver) j. Driver Name/Title: _____

d. Phone No.: 716-827-7200 e. Truck No.: RTL-4 k. Phone No.: _____ l. Truck No.: _____

f. Vehicle License No./State: PX5496 (NY) m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials:

Acknowledgement of Receipt of Materials:

g. Timothy J. O'Hara 072998 n. _____
Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344

b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: Same

Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 072998 san60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g, Operator completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437

c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Lorey Cassidy, RM Lorey Cassidy 072998
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☒ Friable; ☐ Non-friable; ☐ Both 100 % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270573

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

--

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

073198
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MICHAEL MYERS
d. Phone No.: (716) 827-7200 e. Truck No.: 135
f. Vehicle License No./State: PH 3880 N.Y.
Acknowledgement of Receipt of Materials.

g. Michael Myers 073198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
Print/Type Operator's Signature

--	--	--	--	--	--

 Date

f. Name and Address
of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.





NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270572

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Jack D. Harmon
Signature

072518
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: (716) 827-7200 e. Truck No.: RT2-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 073098
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
Print/Type Operator's Signature

f. Name and Address
of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.270574

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	0	0
---	---	---	---	---

 Units

R

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Tack D Harmon
Generator Authorized Agent Name

Tack D Harmon
Signature

08-17-18
Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: Larry Abratta
d. Phone No.: (716) 827-7200 e. Truck No.: 113
f. Vehicle License No./State: 15063P NY
Acknowledgement of Receipt of Materials.

g. Larry Abratta

0	8	0	3	9	8
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Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

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Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270563

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Friable Asbestos k. Quantity

--	--	--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

RQ Asbestos, 9 NA 2212 III 000000 Y 01 T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

For Emergency Response: Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n.)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: GRANT WILLIAMS DRIVER
d. Phone No.: 716-827-7200 e. Truck No.: 201
f. Vehicle License No./State: 13034P NY
g. Grant Williams 090998
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. _____
PRINT/TITLE
ACKNOWLEDGEMENT OF RECEIPT OF MATERIALS.

Section III DESTINATION (Generator completes a-d. destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

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Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d. f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LORAY CASSIDY ORCENK
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Operator's Signature Date

g. ☒ Friable; ☐ Non-friable; ☐ Both 100 % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270563

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502

e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

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 Containers:

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Friable Asbestos k. Quantity: 000035 Units: 4 No.: 01 TYPE: T
RQ Asbestos, 9 NA 2212 III

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON Jack D. Harmon 090998
Generator Authorized Agent Name Signature For Emergency Response: Shipment Date

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: GRANT WILLIAMS DRIVER
d. Phone No.: 716-827-7200 e. Truck No.: 201
f. Vehicle License No./State: 13034P NY
Acknowledgement of Receipt of Materials:

g. Grant Williams 090998
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials:

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 090998 son60
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Cassidy LeRoy Cassidy 090298
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Print/Type Operator's Signature Date

g. ☒ Friable; ☐ Non-friable; ☐ Both 100 % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367520

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

 TYPE:

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

 Units:

1

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Jack D. Harmon

09/14/98

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 PRINT/TITLE: RTI-4
e. Truck No.: RTI-4
f. Vehicle License No./State: PX-496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 09/14/98
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TITLE: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: EarthTech Operator's Signature: _____ Date: _____
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367520

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

 TYPE:

DM	-	METAL DRUM
DP	-	PLASTIC DRUM
B	-	BAG
BA	-	6 MIL. PLASTIC BAG or WRAP
T	-	TRUCK
O	-	OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

JACK D. HARMON

Jack D. Harmon

091498

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 091498
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 091498 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Cassidy, RM LeRoy Cassidy 091498
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367521

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	1	7	K
---	---	---	---	---

 Units

0	1
---	---

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Signature

Shipment Date 09/18/98

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA DRIVER
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)
Acknowledgement of Receipt of Materials.
g. Timothy J. O'Hara 09/18/98
Driver Signature Shipment Date

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.
n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature _____ Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 367521

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

K

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON JACK D. HARMON 0911898
Generator Authorized Agent Name Signature Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n.)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Hazmat Environmental Group, Inc.</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>60 Commerce Drive</u>	i. Address: _____	k. Phone No.: _____	l. Truck No.: _____
<u>Buffalo, NY 14218</u>			
c. Driver Name/Title: <u>TIMOTHY J. O'HARA (DRIVER)</u>	j. Driver Name/Title: _____	m. Vehicle License No./State: _____	
d. Phone No.: <u>716-827-7200</u>	k. Phone No.: _____		
e. Truck No.: <u>RTL-4</u>	l. Truck No.: _____		
f. Vehicle License No./State: <u>PX5496 (NY)</u>	m. Vehicle License No./State: _____		
g. <u>Timothy J. O'Hara</u> <u>091898</u> Driver Signature Shipment Date		n. _____ Driver Signature Shipment Date	

Section III DESTINATION (Generator completes a-d. destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Pam Scott Pam Scott 091898 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy, RM Leroy Cassidy 0911898
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817
Print/Type Operator's Signature Date

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367522

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, New Jersey 08817 **Utica, NY 13502**
e. Phone No.: **732-591-2278** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--	--	--

 TYPE:

--	--	--	--	--	--	--	--	--	--

j. Description of Waste: **Non-Friable Asbestos** k. Quantity:

0	0	0	2	0
---	---	---	---	---

 Units:

Y

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon

Generator Authorized Agent Name

Signature

092198

Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: **Hazmat Environmental Group, Inc.**
b. Address: **60 Commerce Drive**
Buffalo, NY 14218
c. Driver Name/Title: **TIMOTHY J. O'HARA (DRIVER)**
d. Phone No.: **716-827-7200** PRINT/TYPE: **RT-4**
e. Truck No.: **PX5496 (NY)**
f. Vehicle License No./State: **PX5496 (NY)**
g. Acknowledgement of Receipt of Materials: **Timothy J. O'Hara**
h. Signature: **092198**
i. Shipment Date: **092198**

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials: _____
o. Signature: _____
p. Shipment Date: _____

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **5600 Niagara Falls Blvd.** d. Mailing Address: **Same**
Niagara Falls, NY 14304
e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date:

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Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6437**
c. Operator's* Address: **2229 Tomlynn St., Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **EarthTech** f. Name and Address of Responsible Agency: **USEPA Region II, Edison, New Jersey 08817**
g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367522

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

 TYPE:

--	--	--	--	--	--	--	--

j. Description of Waste: Non-Friable Asbestos k. Quantity:

0	0	0	3	0	4
---	---	---	---	---	---

 Units:

0	1
---	---

 No.:

0	1
---	---

 TYPE:

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon
Generator Authorized Agent Name

Jack D. Harmon
Signature

092198
Shipment Date

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL: PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

BLT

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RT-4
f. Vehicle License No./State: PX5496 NY

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 092198
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Al Smith Al Smith 092198
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy Leroy Cassidy 092198
Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367523

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **USEPA Region II** b. Generating Location: **Bossert Manufacturing Site**
c. Address: **2890 Woodbridge** d. Address: **1002 Oswego Street**
Edison, New Jersey 08817 **Utica, NY 13502**
e. Phone No.: **732-591-2278** f. Phone No.: **315-734-1394**

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: **Non-Friable Asbestos** k. Quantity

C	C	C	C	C	C	Y
---	---	---	---	---	---	---

 Units

0	1
---	---

 No.

T

 TYPE

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Generator Authorized Agent Name _____ Signature _____ Shipment Date

0	1	2	3	4	5	6	7	8	9
---	---	---	---	---	---	---	---	---	---

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
a. Name: **Hazmat Environmental Group, Inc.**
b. Address: **60 Commerce Drive**
Buffalo, NY 14218
c. Driver Name/Title: **TIMOTHY J. O'HARA (Driver)**
d. Phone No.: **716-827-7200** PRINT/TYPE **PT-4**
e. Truck No.: **PT-4**
f. Vehicle License No./State: **PX5490 NY**
g. Acknowledgement of Receipt of Materials.

0	9	7	5	9	7
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Driver Signature _____ Shipment Date _____

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ PRINT/TYPE _____
l. Truck No.: _____
m. Vehicle License No./State: _____
n. Acknowledgement of Receipt of Materials.

--	--	--	--	--	--

Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: **Niagara Recycling, Inc.** c. Phone No.: **716-285-3344**
b. Physical Address: **5600 Niagara Falls Blvd.** d. Mailing Address: **Same**
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent _____ Signature _____ Receipt Date

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Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: **EarthTech** b. Operator's* Phone No.: **804-354-6437**
c. Operator's* Address: **2229 Tomlynn St., Richmond, Virginia 23230**
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: **LEON COHEN** Operator's Signature _____ Date

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f. Name and Address of Responsible Agency: **USEPA Region II, Edison, New Jersey 08817**

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable **100** % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 367523

Section I GENERATOR (Generator completes all of Section I.)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Friable Asbestos k. Quantity

0	0	0	3	0
---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon Jack D. Harmon

0	9	2	5	9	8
---	---	---	---	---	---

Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator complete a-d. Transporter I complete e-g. Transporter II complete h-n.)

TRANSPORTER I
a. Name: Hazmat Environmental Group, Inc. h. Name: _____
b. Address: 60 Commerce Drive i. Address: _____
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER) Driver Name/Title: _____
d. Phone No.: 716-827-7200 PRINT/TYPE e. Truck No.: RR-4 k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: PX5496 (NY) m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials. n. _____
Timothy J. O'Hara

0	9	2	5	9	8
---	---	---	---	---	---

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d. destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott

0	9	2	5	9	8
---	---	---	---	---	---

san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g. Operator* completes e.)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn St., Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: LeRoy Cassidy LeRoy Cassidy

0	9	2	5	9	8
---	---	---	---	---	---

Print/Type Operator's Signature Date
f. Name and Address
of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☐ Friable; ☒ Non-friable; ☐ Both _____ % friable 100 % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270564

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, NJ 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

--	--	--	--	--	--	--	--	--	--

 Containers:

--	--	--	--	--	--	--	--

 TYPE:

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Friable Asbestos k. Quantity: 00030 Units: Y No.: 01 TYPE: T
RQ Asbestos, 9 NA 2212 III

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON
Generator Authorized Agent Name

Signature

For Emergency Response:

Shipment Date

10/19/98

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: 716-827-7200 e. Truck No.: RTL-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 10/19/98
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____

--	--	--	--	--

Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: 716-285-3344
b. Physical Address: 56th St. & Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

Whereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott 10/19/98 san6D
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e)

a. Operator's* Name: EarthTech b. Operator's* Phone No.: 804-354-6437
c. Operator's* Address: 2229 Tomlynn Street, Richmond, Virginia 23230
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Leroy Cassidy Leroy Cassidy 10/19/98
Print/Type Operator's Signature Date
f. Name and Address of Responsible Agency: USEPA Region II, Edison, New Jersey 08817

g. ☒ Friable; ☐ Non-friable; ☐ Both 100 % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270575

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

--	--	--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--	--	--

 No.

0	1
---	---

 TYPE

	T
--	---

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

102098

Shipment Date

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA DRIVER
d. Phone No.: (716) 827-7200 e. Truck No.: R72-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 102098
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
Print/Type Operator's Signature Date

f. Name and Address
of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270576

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER
j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	0	0	0
---	---	---	---	---	---

 Units

Y

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jack D. Harmon
Generator Authorized Agent Name

Signature

10/27/92
Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (DRIVER)
d. Phone No.: (716) 827-7200 PRINT/TYPE e. Truck No. RT-4
f. Vehicle License No./State: PX5496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara 102798
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____
Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 235-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
Name of Authorized Agent Signature

--	--	--	--	--	--

 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature

--	--	--	--	--	--

 Date
f. Name and Address of Responsible Agency: 10/26/92

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270577

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Bossert Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

--	--	--	--	--	--	--	--

 Containers

--	--	--	--	--	--	--	--

 TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

0	0	0	0	0
---	---	---	---	---

 Units

4

 No.

0	1
---	---

 TYPE

T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

JACK D. HARMON

Generator Authorized Agent Name

Signature

Shipment Date

11 06 98

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: MIKE MYERS
d. Phone No.: (716) 827-7200 PRINT/TYPE e. Truck No.: 194
f. Vehicle License No./State: 13034P N.Y.
Acknowledgement of Receipt of Materials.

g. Mike Myers 11 06 98
Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ PRINT/TYPE
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

n. _____

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Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address Same
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____

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Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type _____ Operator's Signature _____ Date _____
f. Name and Address of Responsible Agency: _____

g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 270578

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: USEPA Region II b. Generating Location: Boscort Manufacturing Site
c. Address: 2890 Woodbridge d. Address: 1002 Oswego Street
Edison, New Jersey 08817 Utica, NY 13502
e. Phone No.: 732-591-2278 f. Phone No.: 315-734-1394

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

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 Containers

--	--	--	--	--	--	--	--	--	--

 TYPE

j. Description of Waste: Non-Hazardous Building Debris k. Quantity

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 Units

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 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: Hazmat Environmental Group, Inc.
b. Address: 60 Commerce Drive
Buffalo, NY 14218
c. Driver Name/Title: TIMOTHY J. O'HARA (Driver)
d. Phone No.: (716) 827-7200 e. Truck No.: RTZ-4
f. Vehicle License No./State: PX-496 (NY)

Acknowledgement of Receipt of Materials.

g. Timothy J. O'Hara

--	--	--	--	--	--	--	--	--	--

Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
n. _____

Acknowledgement of Receipt of Materials.

Driver Signature

--	--	--	--	--	--	--	--	--	--

Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: Niagara Recycling, Inc. c. Phone No.: (716) 285-3344
b. Physical Address: 5600 Niagara Falls Blvd. d. Mailing Address: Sara
Niagara Falls, NY 14304

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Pam Scott Pam Scott

--	--	--	--	--	--	--	--	--	--

11/12/98
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

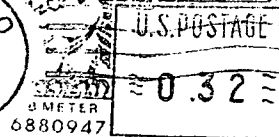
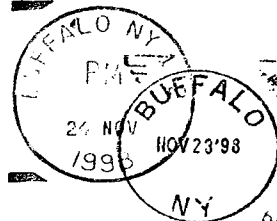
g. ☐ Friable; ☐ Non-friable; ☐ Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



HAZMAT
ENVIRONMENTAL
GROUP, INC.

New Village Industrial Park
60 Commerce Drive
Buffalo, NY 14218-1040



Ken Stoller
ms-105

~~USEPA Region II
2890 Woodbridge
Edison, NJ 08817~~

08837+3602

